

Application Data Sheet

Application Information

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| Application Type:: | Regular |
| Subject Matter:: | Utility |
| CD-ROM or CD-R?:: | None |
| Sequence submission?:: | Paper |
| Computer Readable Form (CRF)?:: | No |
| Title:: | Pancreas-Derived Plasminogen Activator Inhibitor |
| Attorney Docket Number:: | PF290P1D2 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Total Drawing Sheets:: | 10 |
| Small Entity?:: | No |
| Petition included?:: | No |
| Secrecy Order in Parent Appl.?:: | No |

Applicant Information

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|---|---------------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | China |
| Status:: | Full Capacity |
| Given Name:: | Jian |
| Family Name:: | Ni |
| City of Residence:: | Germantown |
| State or Province of Residence:: | MD |
| Country of Residence:: | US |
| Street of mailing address:: | 17815 Fair Lady Way |
| City of mailing address:: | Germantown |
| State or Province of mailing address:: | MD |
| Postal or Zip Code of mailing address:: | 20874 |

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Germany
Status:: Full Capacity
Given Name:: Reiner
Middle Name:: L.
Family Name:: Gentz
City of Residence:: Belo Horizonte-Mg
Country of Residence:: Brazil
Street of mailing address:: Rua Claudio Manoel 602/2201
City of mailing address:: Belo Horizonte - Mg
Country of mailing address:: Brazil
Postal or Zip Code of mailing address:: 30.140.100

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Steven
Middle Name:: M.
Family Name:: Ruben
City of Residence:: Brookeville
State or Province of Residence:: MD
Country of Residence:: US
Street of mailing address:: 19420 Pyrite Lane
City of mailing address:: Brookeville
State or Province of mailing address:: MD
Postal or Zip Code of mailing address:: 20833

Applicant Authority Type:: Inventor
Primary Citizenship Country:: China
Status:: Full Capacity
Given Name:: Y.
Middle Name:: Eric

Family Name:: Shi
City of Residence:: Roslyn Heights
State or Province of Residence:: NY
Country of Residence:: US
Street of mailing address:: 18 Yale Street
City of mailing address:: Roslyn Heights
State or Province of mailing address:: NY
Postal or Zip Code of mailing address:: 11577

Correspondence Information

Correspondence Customer Number:: 22195

Representative Information

Representative Customer Number:: 22195

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|--|----------------------|----------------------|
| This Application | Division of | 09/902,684 | 07/12/01 |
| 09/902,684 | Division of | 09/026,408 | 02/19/98 |
| 09/026,408 | Continuation-in-part of | 08/934,011 | 08/15/97 |
| 08/934,011 | Application claiming the benefit under 35 USC 119(e) | 60/024,056 | 08/16/96 |